ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	01/01/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		•
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation Line of Insurance	1,124,021	-0.10%
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follows rate Adopting NCCI January 1, 2010 rates	s of an advisory organization, specify org	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rates	
	ACIO	Inquirance Company
		Insurance Company Jame of Company
	Courtney Howerton -	Underwriting Operations Manager

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Official - Title

NOV 2 0 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

FILED

JAN 0 1 2010

FORM (RF-3)

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SUMMARY SHEET

	DEDA STATE OF
Change in Company's premium or rate level pro	duced by rate fellowent of Linois
Change in Company's premium or rate level pro effective 01/01/2010	PRINGFIELD, ILLINGRANCE

- - 1. A	(1) Coverage Automobile Liability Private	(2) Annual Premium	(3) Percent
1 A			
Δ	Lutamahila Liahilitu Briyata	Volume (Illinois) *	Change (+or-) **
	Passenger		
	Commercial		
	Automobile Physical Damag		•
	Private Passenger		
_	Commercial		*****
	iability Other Than Auto		
	Burglary and Theft		
	Blass		
	ridelity		
	Surety		
. B	Boiler and Machinery		
	ire		
	xtended Coverage		
1. lr	nland Marine		
	lomeowners		
3. C	Commercial Multi-Peril	-	
	Crop Hail		
5. C	Other Workers' Compensation Life of Insurance	40,611,325	-2.1%
(Does filing only apply to certa Classes? If so, specify: <u>No</u>		certain
	Brief description of filing. (If f Organization, specify organization):	iling follows rates of an a	-
	Neca		
_		103 % 17 201.0	
*	Adjusted to reflect all prior ra *Change in Company's premates.		ılt from application of new
1 (4.00.	ACUITY, A Mutual	I Insurance company
			me of Company
		Regulatory Filing	
			Official - Title

hange in Company's premium o	or rate level produced by rate revision effective	January 1, 2010
(1)	(2)	(3)
	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability		•
Private Passenger		
Commercial		
2. Automobile Physical Dama	age	
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	ation \$25,012,927	-0.1%
Line of Insurance		
Line of Insurance	n territory (territories) or certain classes? If so, spe	cify:
No.	Transcript (territorios) or obstant stacedor. It oc, ope	
Brief description of filing (If fil	ing follows rates of an advisory organization, speci	fy organization):
	approved advisory loss costs.	,
Tate thing bacca on Meeto		

- Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

American Home Assurance Company

Name of Company

Walter Murphy Filings Analyst

Official - Title

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JAN 0 1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

H29219D

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision JAN 0-1 2010 effective January 1, 2010 STATE OF ILLINOIS
DEFARTMENT OF INSURANCE
Percentingfield, Illinois (1) (2) **Annual Premium** Coverage Volume (Illinois) * Change (+or-) ** Automobile Liability Private Passenger Commercial 2 Automobile Physical Damag Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Worker's Compensation \$176,515 5.6% Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt NCCI's 1-1-10 rate revision with a deviation factor of 0.97. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Ansur America Insurance Company Name of Company Wanda Raymond, R&D CL Senior Associate

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision JAN 01 2010 effective 01/01/2010 STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
Percent
Percent (1)(2) Annual Premium Coverage Volume (Illinois) * Change (+or-) ** Automobile Liability Private Passenger Commercial 2 Automobile Physical Damag Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Workers' Compensation \$1,373,000 0.0 % Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory Organization, specify Advisory Voluntary Workers' Compensation Rates organization): and Minimum Premiums Filed By NCCI and a -10% Deviation For Class Code 9082-Restaurants NOC *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Badger Mutual Insurance Company Name of Company Terry Falls - Workers' Compensation Coordinator

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FORM (RF-3)

JAN 0 1 2010

SUMMARY SHEET

		DEPARTMENT ILLINGIS
Change in Company's prer	nium or rate level produce	ed by rate revisible D. ILLINGIS
effective 01/01/2010		יובט, ובבוווינו

	effective 01/01/2010	·	TO LEED, ILLINOIS
_	(1)	(2)	(3)
_		Annual Premium	Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		·
	Commercial		
	Automobile Physical Damag		_
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety	1	
	Boiler and Machinery		
	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other Workers' Compensation	261,042	-1.59%
	Life of Insurance		
•	Dana Silina and cannot to anote	sin tauritam (tauritariaa) a	r aortain
	Does filing only apply to certa	ain territory (territories) o	Certain
	Classes? If so,	plies to all class codes	
	specify: No - app	piles to all class codes	
	Distribution of Stimes (184		
	Brief description of filing. (If f	iling follows rates of an a	advisory
	Organization, specify	Adaption of NCCLL and C	Costs and increase our Company LCM
	organization):	Adoption of NCC1 Loss C	costs and increase our company LCM
	from 1.30 to 1.40.	<u>. </u>	
	*Adjusted to reflect all prior ra	ate changes	
	**Change in Company's pren		alt from application of new
	rates.	namiever winch win res	all from application or new
	iaics.	Bancinsure, Inc.	
			ame of Company
		Kathryn A. Shilling	• •
		,	,,



JAN 0-1 2010

Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 01/01/2010

(1) (2)
Annual Premium
Coverage Volume (Illinois)*

Percent Change (+ or -)**

(3)

15. Other Workers Compensation
Line of Insurance

\$8,346,016

+0.1%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Bituminous Casualty Corporation and

Bituminous Casuarty Corporation and Bituminous Fire and Marine Insurance Company are filing to adopt NCCI's revised loss costs per circular IL-2009-08 and 11 while maintaining our current expense multiplier for each company. This filing will apply to all new and renewal business with effective dates on or after January 1, 2010.

This filing proposes an overall increase of 0.1%. This rate change is the combined effect of a 0.1% increase in NCCI's overall loss costs for industrial classes and no change to either company's expense multiplier.

The exception manual included with this filing contains no changes from our previously filed manual.

* Adjusted to reflect all prior rate changes.

INS00106

** Change in Company's premium level which will result from application of new rates.

Bitumin	ous	Cá	asua	alty	Corporation	1
				~	• • • • • • • • • • • • • • • • • • • •	_

Name of Company

Dan Trotter - Director - Rate Development & Filings
Official - Title

FILED JAN 0-1 2010

Form (RF-3)

SUMMARY SHEET

DEPARTMENT OF ILLINOIS
SPRINGFIELD, ILLINOIS
by rate

Change in Company's premium or rate level produced by rate revision effective 01/01/2010

(1)

(2)

(3) Percent

Coverage

Annual Premium Volume (Illinois)*

Change (+ or -)**

15. Other Workers Compensation

Line of Insurance

\$1,945,507

+0.1%

Does filing only apply to certain territory (territories)or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Bituminous Casualty Corporation and

Bituminous Casualty Corporation and Bituminous Fire and Marine Insurance Company are filing to adopt NCCI's revised loss costs per circular IL-2009-08 and 11 while maintaining our current expense multiplier for each company. This filing will apply to all new and renewal business with effective dates on or after January 1, 2010.

This filing proposes an overall increase of 0.1%. This rate change is the combined effect of a 0.1% increase in NCCI's overall loss costs for industrial classes and no change to either company's expense multiplier.

The exception manual included with this filing contains no changes from our previously filed manual.

* Adjusted to reflect all prior rate changes.

INS00106

** Change in Company's premium level which will result from application of new rates.

Bituminous Fire and Marine Insurance Company

Name of Company

Dan Trotter - Director - Rate Development & Filings

Change in Company's premium or rate	level produced by rate revision effective _	January 1, 2010
(1)	(2)	(3)
. ,	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$12,391,590	-0.1%
Line of Insurance		
Na	ory (territories) or certain classes? If so, sp	респу:
		··
	lows rates of an advisory organization, spec	cify organization):
Rate filing based on NCCI's appro	ved advisory loss costs.	
* Adjusted to reflect all prior rate of	hanges.	•

** Change in Company's premium level which will result from application of new rates.

Chartis Casualty Company (f/k/a American International South Insurance Company)

Name of Company

Walter Murphy Filings Analyst Official - Title

H29219D



JAN 0-1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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e in Company's premium or rate	level produced by rate revision effective	January 1, 2010
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private Passenger	·	
Commercial		
Private Passenger		
• .		*
•		
· ·· -		
_		
	\$7.492.163	-0.1%
	Ψ1,402,100	<u> </u>
	\$7,492,163	-0.
s filing only apply to certain territo	ory (territories) or certain classes? If so, speci	ify:
	Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers' Compensation Line of Insurance	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers' Compensation Annual Premium Volume (Illinois)* Annual Premium Volume (Illinois)* Annual Premium Volume (Illinois)* Annual Premium Volume (Illinois)*

- Adjusted to reflect all prior rate changes.
- Change in Company's premium level which will result from application of new rates.

Chartis Property Casualty Company (f/k/a AIG Casualty Company)

Name of Company

Walter Murphy **Filings Analyst** Official - Title

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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STATE OF ILLINOIS **DEPARTMENT OF INSURANCE** SPRINGFIELD

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	Change in Company's premium or rate l	evel produced by rate revision effective	4/1/10
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
1.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
).	Fire		
10.	Extended Coverage		
11.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other Workers Compensation	\$1,111,692	-0.10%
	Line of Insurance		
Эое	s filing only apply to certain territory (terri	tories) or certain classes? If so, specify	No
srie		s of an advisory organization, specify orga	
	Postpone NCCI's effective date of appro	oval circular IL-2009-11 from 1/1/10 to 4/1/1	U
	A.P. Address Cont. Hoston and add		
	Adjust to reflect all prior rate changes		

* Adjust to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

COLUMBIA NATIONAL INS. CO.

Name of Company

ADD Anti-sons

APR 0 1 2010

FILED

Dennis McVay, CPCU
Director, Research & Development
Official - Title

change in Company's premium or rate leve	el produced by rate revision effective	January 1, 2010
(1)	(2)	(3)
(1)	Annual Premium	Percent
Covorage	Volume (Illinois)*	Change (+ or -)**
<u>Coverage</u>	Volume (minora)	Onango ()
Automobile Liability		
Private Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$41,272,436	-0.1%
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so,	specify:
No.		
Brief description of filing. (If filing follows		pecify organization):
Rate filing based on NCCI's approved	advisory loss costs.	<u> </u>
. A division of the self-set off makes inches along		
* Adjusted to reflect all prior rate chan		
** Change in Company's premium leve	i which will	
result from application of new rates.		
		Commerce and Industry
		Insurance Company
		Name of Company
		Walter Murphy
		Filings Analyst
	 -	Official - Title
H29219D		
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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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ILLINOIS SUMMARY SHEET

FORM RF-3

(1)	(2)	(3)
Coverage	Annual Premium	Percent
4. A. J	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		ww
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other than Auto		
4. December 2 and Think		
5. Glass		
5. Glass 6. Fidelity 7. Surety		
7. Surety		
8. Boiler and Machinery		
8. Boiler and Machinery 9. Fire JAN 0-1 2010		
10. Extended Coverage		
11 Inland Marine STATE OF ILLUSURANCE		
12. Homeowners DEPARTMENT OF INSUIS 13. Commercial Multi-Peril 14. Crop Hail		
13. Commercial Multi-Peril		······································
14. Crop Hail	· · · · · · · · · · · · · · · · · · ·	
15. Workers Compensation	\$6,500,000	0.0%
16. Other		
Line of Insurance		
oes filing only apply to certain territory (territories) or certain c	lasses? If so, specify No	
oes ming only apply to certain termory (termones) or certain c	iasses: ii so, specily <u>ivi</u>	<u> </u>
		•
		stion) Adopting NOOL
rief description of filing (if filing follows rates of an advisory org	janization, specify organiza	Mon) <u>Adopting NCCI</u>
oluntary rates and rating values effective January 1, 20	10 without deviation. Ac	lopting NCCI Januar
xperience Rating Plan values, expected loss rates and	d-ratios, and NCCI retro	osective rating plan v
		Doodill James
 Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from a 	nnlination of new rates	
Change in Company's premum lever which will result nom a	opplication of new rates.	
	Continer	ntal Indemnity Compan
		Name of Compan
	Joan Kir	carich, Actuary
		icial — Title
	Oili	VIG 11110



JAN 0-1 2010

Form (RF-3)

SUMMARY SHEET

(Change in Company's premium or rate	level produced by rate revision effective	1/1/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
4.	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	\$8,761,166	-3.0%
	Line of Insurance		
		ritories) or certain classes? If so, specify:	
All to	erritories, all classes with exception for	class code 6204 Drilling NOC and Driver	s rate of \$11.11.
		rates of an advisory organization, specify of	
We a	re adopting the advisory rates approve	d in NCCI circular IL-2009-11 at current r	nodification of 1.00.
	djusted to reflect all prior rate changes.		
	hange in Company's premium level wh	ich will	
re	sult from application of new rates.		
		EMCASCO Insurance Con	
		Name o	of Company
		Den Const	
		Don Coughennower - Assi	
		Offici	al - Title

FORM (RF-3)



SUMMARY SHEET

JAN 0 1 2010

	Change in Company's premiu effective 01/01/2010	•	SPRINGFIELD, ILLINOIS				
-	(1)	(2)	(3)				
-	Causana	Annual Premium	Percent				
	Coverage	Volume (Illinois) *	Change (+or-) **				
1.	Automobile Liability Private						
	Passenger						
•	Commercial						
2	Automobile Physical Damag		•				
	Private Passenger						
_	Commercial						
3.	Liability Other Than Auto						
4.	Burglary and Theft						
5.	Glass						
6. -	Fidelity						
7.	Surety						
8.	Boiler and Machinery						
9.	Fire						
10.	Extended Coverage						
11.	Inland Marine						
12.	Homeowners						
13.	Commercial Multi-Peril						
14.	Crop Hail						
15.	Other WORKERS' COMPENSATION	14,250,972	-0.1%				
	Life of Insurance						
•	Does filing only apply to certa	ain territory (territories) or	certain				
	Classes? If so.	, (, , , , , , , , , , , , , , , , , ,					
	specify: Filing is	not class or territory particular.					
	·						
	Brief description of filing. (If f	iling follows rates of an ac	dvisory				
	Organization, specify	3	•				
	organization):	Filing adopts voluntary rate	es approved for Illinois in NCCI Circular				
	IL-2009-11. No changes are being mad	e to the loss cost multiplier, which	will remain at 1.56.				
	*Adjusted to reflect all prior ra **Change in Company's premates.		t from application of new				
	iaics.	Employers Assurar	nce Company				
			ne of Company				
			• •				
		Kelly S. Gregory. Ur	nderwriting Analyst				

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STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD

50	ILLI	NOIS	ADN	AINIS	TRAT	MVE:	CODE

CHAPTER I. § 754 SUBCHAPTER I

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FILED

SUMMARY SHEET STATE OF ILLINOIS Change in Company's premium or rate level produced by rate reprint Tof Insurate fefective (1) (2) Annual Premium Coverage Volume (Illinois)* Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril	Change in Company's premium or rate level produced by rate reprinted to Insurate the company's premium or rate level produced by rate reprinted to Insurate to Ins
(1) Annual Premium Percent Coverage Volume (Illinois)* Change (+ or -)** Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Sourety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners	(1) Annual Premium Coverage Volume (Illinois)* Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners
(1) Annual Premium Percent Coverage Volume (Illinois)* Change (+ or -)** Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners	(1) Annual Premium Coverage Volume (Illinois)* Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Sourety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners
Coverage Volume (Illinois)* Change (+ or -)** Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners	Coverage Volume (Illinois)* Change (+ or -)** Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners
Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners	Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners
Other Workers' Corpensation 4 156, 785 -18.80 Life of Insurance Does filing only apply to certain territory (territories) or certain	Other Workers' Corpersation 4156, 785 -18.8% Life of Insurance

new rates.

Employers Compensation Insurance B.

Servy Marie Counce

Servior Product Hanager

Annual Premium Percent Coverage Volume (Illinois)* Change (+ or -)** 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00.		(1)	(2)	(3)
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will		Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	1.	Automobile Liability		
Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will				
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filling. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00.				
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filling. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00.	2.	Automobile Physical Damage		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00.				
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will				
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	3.	Liability Other Than Auto		
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	4.			
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will		• •		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	6.	Fidelity		
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other S4,590,969 -2.6%	7.			
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other S4,590,969 Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	8.	•		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	9.	· ·		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other \$4,590,969 -2.6% Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	10.	Extended Coverage		
13. Commercial Multi-Peril 14. Crop Hail 15. Other Substitute of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	11.	Inland Marine		
14. Crop Hail 15. Other S4,590,969 Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	12.	Homeowners		
14. Crop Hail 15. Other S4,590,969 Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will	13.	Commercial Multi-Peril		
15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	14.			
Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	15.	-	\$4,590,969	-2.6%
All territories, all classes with exception for class code 6204 Drilling NOC and Drivers rate of \$11.11. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory rates approved in NCCI circular IL-2009-11 at current modification of 1.00. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will		Line of Insurance		
* Adjusted to reflect all prior rate changes. * Change in Company's premium level which will	oes f	filing only apply to certain territory (to erritories, all classes with exception for	erritories) or certain classes? If so, specify: or class code 6204 Drilling NOC and Driver	rs rate of \$11.11.
* Change in Company's premium level which will	Brief (description of filing. (If filing follows are adopting the advisory rates approv	s rates of an advisory organization, specify ed in NCCI circular IL-2009-11 at current i	organization): nodification of 1.00.
** Change in Company's premium level which will				
** Change in Company's premium level which will	* A	diusted to reflect all prior rate change	s	
		••		
				•
		13 13 (3km²)	Employers Mutual Casual	ty Company

FILE JAN 0 1 2010 ALLOW SELECTIONS

Name of Company

Don Coughennower - Assistant Vice President Official - Title

H29219D

FORM (RF-3)



SUMMARY SHEET

JAN 0 1 2010

			SPRINGFIELD, ILLING			
	(1)	(2)	_ (3)			
		Annual Premium	Percent			
	Coverage	 Volume (Illinois) * 	Change (+or-) **			
	Automobile Liability Private					
	Passenger					
	Commercial					
	Automobile Physical Damag		_			
	Private Passenger					
	Commercial					
	Liability Other Than Auto					
	Burglary and Theft					
	Glass	·				
	Fidelity					
	Surety					
	Boiler and Machinery					
	Fire					
	Extended Coverage	Marine 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,				
	Inland Marine					
	Homeowners					
	Commercial Multi-Peril					
	Crop Hail					
	Other WORKERS' COMPENSATION	719,146	-24.5%			
	Life of Insurance					
	Does filing only apply to certa	ain territory (territories)	or certain			
	Classes? If so,					
	specify: Filing is	not class or territory particula	r.			
	Brief description of filing. (If	filing follows rates of an	advisory			
	Organization, specify					
	organization):		rates approved for Illinois in NCCI Circula			
	IL-2009-11 and also makes a change to	the company's loss cost multip	olier, reducing the factor from 1.72 to 1.30			
	*Adjusted to reflect all prior ra					
	**Change in Company's pren	nium level which will re	sult from application of new			
	rates.	<u>.</u>	_			
			erred Insurance Company			
			Name of Company			
		Kelly S. Gregory	, Underwriting Analyst			
			Official – Title			

	(2)	(3)
(1)	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+ or -) *
Automobile Liability		
Private Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Workers Compensation	\$2,692,976	3.0%
Line of Insurance		
s filing only apply to certain territory (territoses? If so, specify: No	ries) or certain	

Adjusted to reflect all prior rate changes.

Change in Company's premium level which will result from application of new rates.

> Farmers Insurance Exchange Name of Company

game of Salbort

James J. Gebhard, FCAS, MAAA Actuary, Workers Compensation

Official - Title



STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS

FILED

JAN - 1 2010

FORM (RF-3)

SUMMARY SHEET

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent _ Change (+or-) **
Auto	omobile Liability Private	Volume (minors)	- Change (*Or)
	senger		
	nmercial		
	omobile Physical Damag		
	ate Passenger		
	ate r assenger nmercial		
	oility Other Than Auto		
	glary and Theft		
Glas	-		
Fide	= -		
Sure	•		
	•		
Fire	er and Machinery		
	ended Coverage		
	nd Marine		
	neowners		
	nmercial Multi-Peril		
	o Hail		
	er wc	4,061,445	2.5%
Ouic	Life of Insurance	4,001,440	2.376
	es filing only apply to cersses? If so, cify: No.	tain territory (territories) o	or certain
spe	f december of files of	ESU- Fallance and a set of the	و المحالية
spe Brie		filing follows rates of an	advisory
Brie Org	anization, specify	•	advisory
Brie Org		filing follows rates of an Loss cost adoption.	advisory
Brie Org	anization, specify	•	advisory
Brie Org orga *Adj **Cl	janization, specify anization): justed to reflect all prior hange in Company's pre	Loss cost adoption.	
Brie Org orga *Adj	janization, specify anization): justed to reflect all prior hange in Company's press.	Loss cost adoption. rate changes. mium level which will res	ult from application of ne
Brie Org orga *Adj	janization, specify anization): justed to reflect all prior hange in Company's pre	Loss cost adoption. rate changes. mium level which will res Federated Rural	

FORM (RF-3)



SUMMARY SHEET

	(1)	(2)	JAN 0.1 20 uced by rate revision DEPARTMENT OF ILLING SPRINGFIELD, ILLING		
	(1)	(2) Annual Premiur	(3) n Percent		
	Coverage	- Volume (Illinois)			
Automo	bile Liability Priva		- Unarige (101-)		
Passer		ne -			
Comme	•				
	obile Physical Dam	naa			
	Passenger	nay	•		
Comme	•				
	Other Than Auto				
	y and Theft				
Glass	y and men				
Fidelity					
Surety					
-	ind Machinery				
Fire	nu maciniery	***************************************			
	ed Coverage	·			
Inland I	•				
Homeo					
	ercial Multi-Peril				
Crop H					
•	orker's Compensation	\$14,025,139	0.59/		
Oui <u>ei w</u>	Life of Insurance	\$14,020,139	-0.5%		
	Life of insurance				
		certain territory (territorie	es) or certain		
	s? If so,				
specify	: <u>No</u>	0			
Brief description of filing. (If filing follows rates of an advisory					
		(If filing follows rates of	an advisory		
_	zation, specify	A NOON- 4 4 4	10 mate annihi an unith a devilation fortan of 4 00		
organiz	ration):	Adopt NCCI'S 1-1-1	10 rate revision with a deviation factor of 1.00		
* ^ -1:1	ed to reflect all pri	ior rato changes			
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new					
•		bienianii ievei mincii mii	result from application of new		
**Chan	igo in company o				
•	go in Company o	Frankenmuth	n Mutual Insurance Company		
**Chan	ge iii eeiiipany e	Frankenmuth	n Mutual Insurance Company Name of Company		
Chan	go iii oompany o	*************************************	Name of Company		
Chan	ge iii eeiiipaiiy e	*************************************			

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 1/1/2010

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
 Au Lia Bu Gl: Fic Su Bo Fir Ex Inl Co Cr 	Passenger Commercial atomobile Physical Damage Private Passenger Commercial ability Other Than Auto arglary and Theft ass delity arety biler and Machinery restended Coverage and Marine and Marine presented Multi-Peril rop Hail ther Workers' Compensation Line of Insurance	7,663,085	-1.17%
Brief de	escription of filing. (If filing follows 1/10 rates.	(territories) or certain classes? If so, specify: rates of an advisory organization, specify organization, specify organization of new rates.	No Adoption of the

General Casualty Company of Wisconsin

Name of Company

Kendra Benninger - C/L Operations System Technician

Official - Title

RECEIVED

NOV 19 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD



JAN 0-1 2010

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2010

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
). Extended Coverage		
. Inland Marine		
2. Homeowners		
Commercial Multi-Peril		
Crop Hail		
5. Other Workers' Compensation	10,699,582	0.32%
Line of Insurance		
oes filing only apply to certain territory	(territories) or certain classes? If so, specify:	No
rief description of filing. (If filing follows	s rates of an advisory organization, specify org	ganization): Adoption of the NCCI
Adjusted to reflect all prior rate change	s. which will result from application of new rates	
	General Casualty Insurance (
	N	lame of Company

Kendra Benninger - C/L Operations System Technician

Official - Title



NOV 19 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD



JAN 0-1 2010

hange in Company's premium or rate	level produced by rate revision effective	January 1, 2010
, , ,		
(1)	(2)	(3)
` '	Annual Premium	Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage	•	
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$844,466	-0.1%
Line of Insurance	4011,100	
Ente of modification		
Does filing only apply to certain territorial	ory (territories) or certain classes? If so, s	specify:
No.		
	ows rates of an advisory organization, spe	ecity organization):
Rate filing based on NCCI's approv	ved advisory loss costs.	

- Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Granite State Insurance Company

Name of Company

Walter Murphy Filings Analyst

Official - Title

H29219D



JAN 0-1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS



NOV 17 2009

ILLINOIS SUMMARY SHEET FORM RF-3

Chan	ge in Company's premium or rate level produced by	rate revision effective <u>January</u>	1, 2010
	(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
4	Coverage	Volume (Illinois)*	Change (1 or -)
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation	5,744,259	4.1%
16.	Other	0,144,200	
10.	Line of Insurance		
_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Does	filing only apply to certain territory (territories) or ce	ertain classes? If so, specify	
			() A - () () () ()
	description of filing (if filing follows rates of an advis		
Advis	sory Rates, without deviation, approved under NCC	Circular IL-2009-11 to be effective	e January 1, 2010.
*	Adjusted to reflect all prior rate changes.		
		It from application of now rates	
	change in Company's premium level which will resu	it from application of new rates.	
		Great West Cosuelty	Company
	-	Great West Casualty (Name of Cor	
			······································
	FILED	Janice L. Hohens	
		Actuarial Ar Official - 1	
	JAN 0-1 2010	Oπiciai - I	iue
	0 ,		

FILED

FORM (RF-3)

SUMMARY SHEET

JAN 0 1 2010

Change in Company's premium or rate level produced by rate Property of Insurance effective 01-01-2010

	CHECHVE 01-01-2010	<u> </u>	
-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private	,	
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3 .	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$99,314	- 1.6%
	Life of Insurance		
•	Does filing only apply to cert Classes? If so, specify: No, all	tain territory (territories) or	r certain
	Brief description of filing. (If	filing follows rates of an a	advisorv
	Organization, specify	iming follows rates or an e	
	organization):	The purpose of this filing is	s to adopt the NCCI Loss costs contained
	,	e 01-01-2010. Our loss cost multip	lier will remain at 2.17. This will result in
	an overall rate change of -1.6% based or	Harco's premium distribution.	
	*Adjusted to reflect all prior i	rate changes.	
	**Change in Company's pre-	mium level which will resu	ılt from application of new
	rates.		
		Harco National Ins	surance Company
		Na	me of Company
		Al Birch, Sr. Vice F	President

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2010.

	(1)	2008 (2) GPW	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Danage		
	Private Passenger		
	Commercial Liability Other Than Auto Burglary and Theft		
3.	Liability Other Than Auto		
4.	Burglary and Theft STATE OF ILLINOIS Glass DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS		
5.	Glass DEPARTMENT OF ILLINOIS		
6.	Fidelity		-
7.	Surety	<u> </u>	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	2,745,256	-1.27%
	Lina of Incurance		

Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No certain territory. No certain class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

> We are adopting National Council on Compensation Insurance (NCCI) 01/01/2010 Illinois Advisory Rates and Miscellaneous Values. We are applying -10% rate deviation to all classes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates. Premium change reflects adoption of 01/01/2010 advisory rates and application of the above rate deviation.

> Illinois Casualty Company Name of Company

Fred Parcells, Program Manager



Form (RF-3)

SUMMARY SHEET STATE OF ILLINOIS SPRINGFIELD, ILLINOIS 1/1/2010

(Change in Company's premium or rat	e level produced by rate revision effective	1/1/2010
			(2)
	(1)	(2)	(3) Percent
	6	Annual Premium	Change (+ or -)**
	Coverage	Volume (Illinois)*	Change (+ or -)
1.	Automobile Liability		
	Private Passenger		
	Commercial		,
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	\$3,225,999	-0.9%
	Line of Insurance		
		•	
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
All to	erritories, all classes with exception fe	or class code 6204 Drilling NOC and Driver	s rate of \$11.11.
Brief (description of filing (If filing follows	s rates of an advisory organization, specify of	organization):
		ed in NCCI circular IL-2009-11 at current r	
	are adopting the advisory rates approv	od iii iveer circular 12 2005 11 de carrone i	
* A	djusted to reflect all prior rate change	o o	
	hange in Company's premium level w		
	sult from application of new rates.	men win	
16	suit from application of new rates.		
		Illinois EMCASCO Insura	ince Company
			of Company
		ranc	or Company
		D C 1	1 1 1 Th
		Don Coughennower - Assi	
		Offici	ial - Title

hange in Company's premium or rate	level produced by rate revision effective	January 1, 2010
(1)	(2)	(3)
(· /	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
<u>5575.435</u>		·
Automobile Liability		
Private Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation Line of Insurance	\$64,246,844	-0.1%
	() () () () () () () () () ()	
No.	ory (territories) or certain classes? If so	, ѕреспу:
District of the state of the st		
	ows rates of an advisory organization, s	specify organization):
Rate filing based on NCCI's approv	red advisory loss costs.	
* Adjusted to reflect all prior rate ch		
Change in Company a premium i		
result from application of new rate	2 8.	
		Illinois National Insurance Co.
	_	Name of Company
		\8/a14a a 88aaaa kaa
	LED	Walter Murphy
		Filings Analyst

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Filings Analyst

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	Change in Company's premium or ra	ate level produced by rate revision effort	ective: 1/1/2010
	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity	FIL	ED
7.	Surety		
8.	Boiler & Machinery	JAN . 0	1 2010
9.	Fire	STATE OF	ILLINOIS
10.	Extended Coverage	DEPARTMENT O SPRINGFIELI	F INSURANCE
11.	Inland Marine		_
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation	\$643,882	-10%
16.	Other:		
	Line of Insurance		
	iling only apply to certain territory (ter pecify:	ritories) or certain classes? No	
change the mu	e from using NCCI rates to using NCC	CI loss costs effective January 1, 2010	y organization) IMT Insurance is filing to D. Manual pages are attached showing um premium formulas, and the maximum
*Adine	ted to reflect all prior rate changes.		

IMT Insurance Company Name of Company Jason Thompson, BA, MA Filing Analyst, Research & Development Official - Title

^{*}Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

hange in Company's premium or rate le	evel produced by rate revision effective	January 1, 2010
		•
(1)	(2)	(3)
(.)	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
<u>ooverage</u>	voidino (imitale)	<u> </u>
Automobile Liability		
Private Passenger _		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	to the state of th	
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		-
15. Other Workers' Compensation	\$27,639,086	-0.1%
Line of Insurance	Ψ27,000,000	0.170
Line of modration		
Does filing only apply to certain territor	y (territories) or certain classes? If so,	specify:
No.	, (
Brief description of filing. (If filing follow	ws rates of an advisory organization, sp	pecify organization):
Rate filing based on NCCI's approve	ed advisory loss costs.	
 * Adjusted to reflect all prior rate cha 		
** Change in Company's premium le	vel which will	
result from application of new rates	S.	
		The Insurance Company of the
		State of Pennsylvania
		Name of Company
		Walter Murphy
		Filings Analyst
	·	Official - Title
1100010D	IANI A-1 2010	

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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FORM (RF-3)



SUMMARY SHEET

effective January 1, 2010	*	STATE OF ILLINOIS DEPARTMENT OF INSURA SPRINGFIELD, ILLINOIS		
(1)	(2)	SPRINGFIELD, ILLINOIS		
` ,	Annual Premium	Percent		
Coverage	 Volume (Illinois) * 	Change (+or- <u>) **</u>		
Automobile Liability Privat	ie			
Passenger				
Commercial				
Automobile Physical Dam	ag			
Private Passenger				
Commercial				
Liability Other Than Auto				
Burglary and Theft				
Glass				
Fidelity				
Surety				
Boiler and Machinery				
Fire				
Extended Coverage				
Inland Marine				
Homeowners				
Commercial Multi-Peril				
Crop Hail				
Other Workers Compensation	\$ 4,731,579 Man Prem @ CRL	+0.24% (Estimated)		
Life of Insurance				
Does filing only apply to certain territory (territories) or certain				
Classes? If so,	- ,			
specify: No				
· · · · · · · · · · · · · · · · · · ·	(If filing follows rates of an a	dvisory		
Organization, specify		15" . II 0000 00 1		
organization):		oss cost filing IL-2009-08. Approval circula		
	mercial Insurance Mutual will adopt the			
	ange to increase more than +10% or deci	rease more than -10%.		
*Adjusted to reflect all price	•	lk for on a multipation of the		
	oremium level which will resu	it from application of new		
rates.	Michigan Commer	oial Incurance Mutual		
		cial Insurance Mutual		
		me of Company orporate Compliance & Statistics Managel		
	veronica iviatejko G	riporate compliance a statistics Manage		

FORM (RF-3) SUMMARY SHEET

Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization): We are adoping the NCCI approval 1/1/2 and renewal policies.	(3) Percent Change (+ or -) *
Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/12	
Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Homeowners Commercial Multi-Peril Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Crop Hail Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Other Workers Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	0.0%
Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adoping the NCCI approval 1/1/2	_
organization, specify organization): We are adoping the NCCI approval 1/1/2	
organization, specify organization): We are adoping the NCCI approval 1/1/2	
	4/0040
and renewal policies.	1/2010 voluntary loss costs, to
	· · · · · · · · · · · · · · · · · · ·

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



JAN - 1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Mid-Century Insurance Company

Name of Company

game of Matheal

James J. Gebhard, FCAS, MAAA Actuary, Workers Compensation

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FORM (RF-3)

JAN 01 2010

SUMMARY SHEET

STATE OF ILLINOIS DEPARTMENT OF ILLINOIS
SPRINGFIELD INSURANCE
Change in Company's premium or rate level produced by rate revisitions effective January 1, 2010

	(1)	(2)	(3)
	, ,	Annual Premium	Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
•	Passenger		0.00%
	Commercial		0.00%
2.	Automobile Physical Damage		
	Private Passenger		0.00%
	Commercial		0.00%
3.	Liability Other Than Auto		0.00%
4.	Burglary and Theft		0.00%
5.	Glass		0.00%
6.	Fidelity		0.00%
7.	Surety		0.00%
8.	Boiler and Machinery		0.00%
9.	Fire		0.00%
10.	Extended Coverage		0.00%
11.	Inland Marine		0.00%
12.	Homeowners		0.00%
13.	Commercial Multi-Peril		0.00%
14.	Crop Hail	04.045000	0.00% 0.00%
15.	Other Workers Compensation	\$1,015280	0.00%
	Life of Insurance		
	Does filing only apply to cert		ries) or certain
	classes? If so, specify: All	erritories.	
	Duine docemintion of filing	/If filing follows water	es of an advisory
	Brief description of filing.	(IT I) IIII TO HOWS FAC	es of an auvisory
	organization, specify organiza	Adopting NCCI's advis	sory rates effective 01-2010.

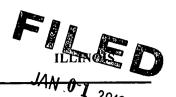
Midwest Family Mutual Insurance Company Name of Company FILED

Heather Sams, R&D Analyst Official--Title

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^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.



ILLINOIS SUMMARY SHEET FORM RF-3

DED STATE	2010
DEPARTMENT OF SPRINGFIELD	ILLINOIS OF INSUS
SPRINGFIE	FINOIS
: 121	, ILLINOVANCE

Chang	ge in Company's premium or rate level p	1/1/2009 2010	
	Coverage	(2) (3) Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
	27.11.6		,
1.	Automobile Liability		
	Private Passenger Commercial		-
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other than Auto		
4.	Burglary and Theft	- 1311 J.	
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation	12,332,445	+0.0%
16.	Other:		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing (if filing follows rates of any advisory organization, specify organization). Midwest Insurance Company will adopt the advisory rates effective January 1, 2010 with the following deviations code 3507 +12%, codes 4130, 4307, 5188, 5445, 5537, 7580, 8044, 8107, 8835, 8864, 9102, +10%, codes 7228, 7229, 8292 +7%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Midwest Insurance Company
Name of Company

Larry E. Hochstetler-VP Planning

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ILLINOIS SUMMARY SHEET

FORM RF-3

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or –)*
1. Automobile Liability		g ,
Private Passenger		
Commercial		
Automobile Physical Damage Private Passenger		
Commercial	<u> </u>	
3. Liability Other than Auto		
4. Burglary and Theft 5. Glass		
6. Fidelity		
7. Surety	British Children	
0.5 % 1.4 1.1	AN A-1 2010	
9. Fire	AN 0-1 2010 —————	
10. Extended Coverage		
11. Inland Marine	NTE OF ILLINOIS MENT OF INSURANCE	
12. nomeowners SPR	NGFIELD, ILLINOIS	
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$1,856,244	-0.1%
16. Other Line of Insurance		
Line of insurance		
Does filing only apply to certain territory (t	rritories) or certain classes? If so, specify	
-	Thereby of contain diagons. If co, openly	· · · · · · · · · · · · · · · · · · ·
No		
Brief description of filing (if filing follows ra	es of an advisory organization, specify organiz	ation)
Adoption of NCCI Workers Compensation Loss	Cost Reference Filing Number IL-2009-11, effective	01/01/2010
Adoption of Noor Workers Compensation Loss	5551,1515151760 1 ming 114111001 12 2000-11, 611651110	<u> </u>

National Interstate Insurance Company Name of Company

Kathy Juhasz, Regulatory Compliance Spec.
Official — Title

Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.

SUMMARY SHEET

hange in Company's premium or rate l	evel produced by rate revision effective	January 1, 2010
	•	
(1)	(2)	(3)
(.,	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
<u>ooverage</u>	<u></u>	
1. Automobile Liability		
Private Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail15. Other <u>Workers' Compensation</u>	\$66,547,781	-0.1%
Line of Insurance	Ψου,υτι,τοτ	
Line of insurance		
Does filing only apply to certain territor	ory (territories) or certain classes? If so	, specify:
No.		
•		15 - 15 - 15 - 1
Brief description of filing. (If filing follo	ows rates of an advisory organization, s	specify organization):
Rate filing based on NCCI's approv	red advisory loss costs.	
* Adjusted to reflect all prior rate ch	anges	
** Change in Company's premium le		
result from application of new rate		
result from application of new rate		National Union Fire Insurance
		Company of Pittsburgh, Pa.
•		Name of Company
		Walter Murphy
		Filings Analyst
		Official - Title
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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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Change in Company's premium or rate	e level produced by rate revision effective	9 January 1, 2010
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private Passenger		
Commercial 2. Automobile Physical Damage Private Passenger		·
Commercial		
Liability Other Than Auto Purglant and Thaff		
 Burglary and Theft Glass 		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation Line of Insurance	\$83,403,457	-0.1%
Does filing only apply to certain terr	itory (territories) or certain classes? If so	o, specify:
	and the second s	
	llows rates of an advisory organization, s	specify organization):
Rate filing based on NCCI's appro	oved advisory loss costs.	
* Adjusted to reflect all prior rate	changes	
** Change in Company's premium result from application of new results.	level which will	
	Ŋ	New Hampshire Insurance Company
	 -	Name of Company
		!.'

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STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS

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Walter Murphy Filings Analyst Official - Title

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Section 754 EXHIBIT A Summary Sheet (Form RF-3)



FORM (RF-3)

SUMMARY SHEET

DEPARTMENT OF ILLINOIS

Change in Company's premium or rate level produced by rate revisions in ILLINOIS

Change in Company's premium or rate level produced by rate revisions in ILLINOIS

епесиче 01/01/2010		
(1)	(2)	(3)
_	Annual Premium	Percent
Coverage	 Volume (Illinois) * 	Change (+or-) **
Automobile Liability Private		
Passenger	***************************************	
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass	<u> </u>	
Fidelity		
Surety	***************************************	
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Workers Compensation	\$ 896,522.00	- 0.1%
Life of Insurance		
Does filing only apply to cert	ain territory (territories) o	r certain
Classes? If so,	• , ,	
specify: N/A		
Brief description of filing. (If	filing follows rates of an a	advisory
Organization, specify	•	•
Organization, specify organization):	Adoption of NCCI Loss C	costs effective 1/1/2010
Organization, specify	Adoption of NCCI Loss C	costs effective 1/1/2010
Organization, specify organization): (-0.1%) as filed and approved in Circu	Adoption of NCCI Loss Collar IL-2009-11. There are no other	costs effective 1/1/2010
Organization, specify organization): (-0.1%) as filed and approved in Circular Adjusted to reflect all prior reflects.	Adoption of NCCI Loss Collar IL-2009-11. There are no other atte changes.	costs effective 1/1/2010 revisions.
Organization, specify organization): (-0.1%) as filed and approved in Circul *Adjusted to reflect all prior reflect al	Adoption of NCCI Loss Collar IL-2009-11. There are no other atte changes.	costs effective 1/1/2010 revisions.
Organization, specify organization): (-0.1%) as filed and approved in Circular Adjusted to reflect all prior reflects.	Adoption of NCCI Loss Collar IL-2009-11. There are no other ate changes. nium level which will resu	costs effective 1/1/2010 revisions. ult from application of new
Organization, specify organization): (-0.1%) as filed and approved in Circul *Adjusted to reflect all prior reflect al	Adoption of NCCI Loss Collar IL-2009-11. There are no other ate changes. nium level which will resu	revisions. ult from application of new

Official - Title

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Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium revision effective January		by rate
(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or <u>-)**</u>
Coverage	volume (IIIIIOIS).	change (+ or)
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	11,411,284	-1.7%
Line of Insurance		
Does filing only apply to certain If so, specify:	territory (territories)	or certain classes?
Brief description of filing. (If organization, specify organization	n): Old Republic General	l Insurance Corporation -2009-08 Advisory Loss
	n): Old Republic General Adoption of NCCI IL-	l Insurance Corporation -2009-08 Advisory Loss
	cosos, macos, and	

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Old Republic	General	Insurance	Corporation	
	Name of	Company		



Deborah J. Matthews - Assistant Vice President - Compliance
Official - Title

JAN - 1 2010

Change in	n Company's	premium	or	rate	level	produced	by	rate
revision	effective	January	1,	2010				

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	11,847,759	+11.7
Line of Insurance		
Does filing only apply to certain If so, specify:	territory (territories)or	certain classes?
Brief description of filing. (If organization)		e Company 009-08 Advisory Loss

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Old Republic Insurance Company

Name of Company

JAN - 1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
H2921 SPRINGFIELD, ILLINOIS

Deborah J. Matthews - Manager - Regulatory Compliance
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	1-1-2010
(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
<u>Coverage</u>	<u>Volume (Illinois)*</u>	Change (+ OI -/
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	2,248,128	+1.3%
Line of Insurance		
Code 8045 will remain unchanged at 1.4	y (territories) or certain classes? If so, spe 427; Class Codes 7380 and 8835 will now other classes will remain unchanged at	have a separate loss cost multiplier of
memorandum and exhibits for document	tation of this change.	
Brief description of filing. (If filing follows Cost Revisions - announced in Circular I	s rates of an advisory organization, specify IL-2009-08	organization): Adoption of NCCI Loss
*Adjusted to reflect all prior rate changes	s. vhich will result from application of new rate	ae
Change in Company's premium level w	Whom will result from application of new rate	
	Pharmacists	s Mutual Insurance Company Name of Company
	Kris Laub	enthal - Rate Filing Analyst
		Official – Title



JAN - 1 2010



JAN 0 1 2010

Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

(Change in Company's premium or rate	level produced by rate revision effective	January 1, 2010
	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$1,076,095	0.0%
	Line of Insurance		
Does f	iling only annly to certain territory (ter	ritories) or certain classes? If so, specify:	
No No	ning only apply to certain territory (ter	intofics) of certain classes. If so, specify.	
110			
Brief o	description of filing (If filing follows:	rates of an advisory organization, specify of	organization).
		ad Rating Values referenced in Circular #II	
1144	,		
	djusted to reflect all prior rate changes.		
	nange in Company's premium level wh	ich will	
re	sult from application of new rates.		

Preferred Professional Insurance Company
Name of Company

Denise Hill, SVP, General Counsel, Corporate Compliance Officer

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 1/1/2010 (3) (1) (2) **Percent Annual Premium** Volume (Illinois)* Change (+ or -)** **Coverage** 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 13,247,296 -0.87% 15. Other Workers' Compensation Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.

Regent Insurance Company

Name of Company

Kendra Benninger - C/L Operations System Technician

Official - Title



JAN 0 1 2010

STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS



NOV 19 2009

Section 754.EXHIBIT A Summary Sheet (Form RF-3)



FORM (RF-3)

JAN 0-1 2010

SUMMARY SHEET

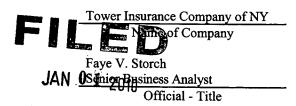
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Official - Title

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		****
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	· · · · · · · · · · · · · · · · · · ·	
Extended Coverage		····
Inland Marine		
Homeowners		
Commercial Multi-Peril		***************************************
Crop Hail		
Other Workers' Compensation	\$43,048	-0.1%
Life of Insurance		
Does filing only apply to certa	ain territory (territories) or	certain
Classes? If so,		
specify: No		
Brief description of filing. (If the	filing follows rates of an a	dvisory
Organization, specify	ming tollows rates or arra-	avioury
organization):	This follows the 1-1-20	110 loss cost filing on our be
NCCI. Please reference NCCI circ		
110011 10000 101010 1000 1000		
*Adjusted to reflect all prior ra		
**Change in Company's pren	nium level which will resul	It from application of n
rates.	SFM Mutual Insura	ance Company
		me of Company
		P & Director of Underwriting

	Change in Company's premium or rate	level produced by rate revision effective	01/01/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation Line of Insurance	347,345	-0.1%
Does i	filing only apply to certain territory (ter	rritories) or certain classes? If so, specify:	
Tow		rates of an advisory organization, specify on the control of the c	
We	wish to make this filing effective fo	or all policies effective on or after Janua	ary 1, 2010.

* Adjusted to reflect all prior rate changes.



^{**} Change in Company's premium level which will result from application of new rates.

	Change in Company's premium or rate	level produced by rate revision effective	01/01/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	***	
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	0-	0.0%
	Line of Insurance		
Does No.	filing only apply to certain territory (ter	ritories) or certain classes? If so, specify:	
Tow Cos	wer National Insurance Company here its and Rating Values effective 1/1/2	rates of an advisory organization, specify or rewith proposes to adopt NCCI's latest 010. r all policies effective on or after Janua	Voluntary Market Loss
* /	Adjusted to reflect all prior rate changes		

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will

** Change in Company's premium level which will result from application of new rates.



JAN 0-1 2010

Tower National Insurance Company

Name of Company

Faye V. Storch Senior Business Analyst Official - Title

	revision effective	January 1, 2010 (2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -) *
	Automobile Liability		
	Private Passenger		
	Commercial		
	Automobile Physical Damage		
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Workers Compensation	\$9,042,152	-1.8%
	Line of Insurance		
	Does filing only apply to certain territory (territor) (territor) lasses? If so, specify: No	ories) or certain	
_			
	Brief description of filing. (If filing follows rates		
0		adoping the NCCI approval 1/1/201	0 voluntary loss costs, for
_	and rene	ewal policies.	
_			
_			

Adjusted to reflect all prior rate changes.

Change in Company's premium level which will result from application of new rates.

Truck Insurance Exchange

Name of Company

game of Galbart

James J. Gebhard, FCAS, MAAA Actuary, Workers Compensation
Official - Title

FILED

JAN - 1 2010

STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS



MAR 1 2010

Change in Company's premium or rate level produced by rate revision effective: 1/1/2010

	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		FILED
3.	Liability Other Than Auto		
4.	Burglary & Theft		JAN 0 1 2010
5.	Glass		STATE OF ILLINOIS
6.	Fidelity		STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS
7.	Surety		SPRINO
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation	\$157.00	0%
16.	Other:		
If so, sp	pecify:	(territories) or certain classes? No	
Brief de	secription of filing (If filing follows	rates of an advisory organization, specify o	reanization). Wadana Incuran

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Wadena Insurance is filing to change from using NCCI rates to using NCCI loss costs effective January 1, 2010. Manual pages are attached showing the multiplier we wish to use, the expense constant (same as NCCI's), the minimum premium formulas, and the maximum minimum premium (also same as NCCI's).

Wadena Insurance Company
Name of Company

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.



JAN 0-1 2010

Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS

	Change in Company's Premium or	rate level produced by rate revision effective	1/1/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$58,664,882 (2008)	-0.1%
	Line of Insurance		
Doe No	s filing only apply to certain territory	(territories) or certain classes? If so, specify:	
Brie	f description of filing. (If filing follows	rates of an advisory organization, specify organiza	tion):
Ado	ption of Illinois Workers Compensation	on rates from NCCI approved by Illinois of Insurance	e effective January 1, 2010

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

> West Bend Mutual Insurance Company Name of Company

Stephen J. Mueller, CPCU - Product Development Specialist Official - Title

H29219D

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Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

(Change in Company's premium or rate	level produced by rate revision effective	January 1, 2010
	(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	Coverage	volume (minois)	Change (· or)
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	23,078,990	+6.5
	Line of Insurance		
Does f N/A	iling only apply to certain territory (ter	ritories) or certain classes? If so, specify:	
Brief o	description of filing. (If filing follows a less all premium level change of + 6.5. Ad the NCCI rates.	rates of an advisory organization, specify opting January 1, 2010 advisory rates, and	organization): I filing a deviation of 1.085
from	field Insurance Company #228-24112		

JAN 0-1 2010

STATE OF ILLINOIS WE DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS

Westfield Insurance Co.

Name of Company

Rhonda Roberts, CIC
Production Specialist
Underwriting Office- Commercial
Official - Title

result from application of new rates.

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Form (RF-3)

SUMMARY SHEET

STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD

	Change in Company's premium or rate	level produced by rate revision effective	January 1, 2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	2,980,208	-4.4
	Line of Insurance		
Does N/A		ritories) or certain classes? If so, specify:	
Brief	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
Ove	rall premium level change -4.4 and a pr	reviously filed deviation of 1.25 from the N	ICCI rates. Adopting January 1,
	0 advisory rates.		
	stfield National Insurance Company #2:	28-24120	

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



JAN 0-1 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Westfield National Insurance Co.

Name of Company

Rhonda Roberts, CIC
Production Specialist
Underwriting Office - Commercial
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	<u>Volume (Illinois)*</u>	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Comm	ercial	
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	58,533	-0.1%
Line of Insurance		
Does filing only apply to certain ter	ritory (territories) or certain classes? If so, specify	/: <u>No</u> .
Brief description of filing. (If filing for	ollows rates of an advisory organization, specify o	rganization):
Adopt loss costs eff 1/1/2010		,
	·	
*Adjusted to reflect all prior rate ch		
**Change in Company's premium	level which will result from application of new rates	S.
	XL Insurance America	
		Name of Company
		Official – Title



ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	4,140,490	-0.1%
Line of Insurance	1,110,100	31.73
Zino or modia.		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No.
Brief description of filing. (If filing follows	rates of an advisory organization, specify org	ganization):
Adopt loss costs eff 1/1/2010		
*Adjusted to reflect all prior rate change:	,	
	or. Solich will result from application of new rates.	
	VI. Specialty Incurance Comp	any.
	XL Specialty Insurance Comp	Kally
	N:	ame of Company
	No.	

